

**REGULAR CERTIFICATION APPLICATION****PERSONAL INFORMATION**

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NUMBER

MAILING ADDRESS	CITY	STATE	ZIP CODE

HOME PHONE NUMBER	WORK PHONE NUMBER	GENDER

EMAIL ADDRESS

	-		-			
BIRTHDATE (MM-DD-YYYY)				FORMER LAST NAME(S)	HIGHEST EDUCATIONAL DEGREE	

**IT IS THE RESPONSIBILITY OF THE APPLICANT TO MAINTAIN CURRENT INFORMATION, INCLUDING NAME AND MAILING ADDRESS, ON FILE WITH THE TEACHER CERTIFICATION OFFICE. ALL NAME CHANGES MUST BE SUPPORTED WITH A PHOTOCOPY OF THE LEGAL DOCUMENT VERIFYING THE CHANGE.**

**CERTIFICATION AND BACKGROUND INFORMATION**

COMPLETE THE FOLLOWING QUESTIONS CAREFULLY AND COMPLETELY BEFORE PROVIDING INFORMATION. **ANY FALSIFICATION OR DELIBERATE MISREPRESENTATION, INCLUDING OMISSION OF A MATERIAL FACT, IN COMPLETION OF THIS APPLICATION CAN BE GROUNDS FOR DENIAL OF CERTIFICATION.**

1. Have you been convicted for a violation of criminal law, except for minor traffic violations? Please include DWIs.  
☐ YES ☐ NO
2. Do you currently have any outstanding criminal charges or warrants of arrest pending against you? This would include any state, province, territory, and/or country.  
☐ YES ☐ NO
3. Is there action pending to revoke or suspend a certificate or license issued to you by another jurisdiction? If "yes," on a separate sheet of paper, list the agency, including complete address and telephone number as well as the purpose of the investigation or inquiry.  
☐ YES ☐ NO
4. Have you ever had any adverse action taken on any certificate or license? (Adverse action includes letters of warning, reprimands, suspensions, revocations, voluntarily surrenders, or avoidance)  
☐ YES ☐ NO
5. Are you currently or have you ever been the subject of any certificate or licensing investigation or inquiry by any certification or licensing agency for allegations of misconduct? If "yes," on a separate sheet of paper, list the agency, including complete address and telephone number as well as the purpose of the investigation or inquiry.  
☐ YES ☐ NO
6. Have you ever been denied certification? This would include any state, province, territory, and/or country.  
☐ YES ☐ NO

**IF YOU ANSWERED 'YES' TO ANY OF THE QUESTIONS ABOVE (1-6), PROVIDE A DETAILED STATEMENT ON A SEPARATE SHEET AND SIGN THE STATEMENT.**

7. Have you ever held a teaching certificate in another state? ☐ YES ☐ NO

STATE	EXPIRATION DATE	STATE	EXPIRATION DATE
-------	-----------------	-------	-----------------

8. Are you currently under contract with a public school district in Alaska? ☐ YES ☐ NO

If yes, school district: \_\_\_\_\_, beginning contract date: \_\_\_\_\_

**Department of Education & Early Development, Teacher Education and Certification**

801 West 10th Street, Suite 200, PO Box 110500 Juneau, AK 99811-0500

Phone: (907) 465-2831 Fax: (907) 465-2441

**REGULAR CERTIFICATION APPLICATION****ETHNICITY**

- ☐ ALASKA NATIVE  
☐ ASIAN OR PACIFIC ISLANDER  
☐ AFRICAN AMERICAN  
☐ HISPANIC  
☐ CAUCASIAN  
☐ AMERICAN INDIAN/  
NATIVE AMERICAN  
☐ OTHER

ALASKA NATIVE: Any person having origins in any of the original peoples of Alaska, and who maintains cultural identification through tribal affiliation or community recognition. This may include, for example, any person of Yup'ik, Inupiat, Aleut, Athabaskan, Tlingit, Haida, or Tsimshian origin.

ASIAN OR PACIFIC ISLANDER: Any person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

AFRICAN AMERICAN: (Not of Hispanic origin); any person having origins in any of the Black racial groups of Africa.

HISPANIC: Any person of Mexican, Puerto Rican, Cuban, Central American, or other Spanish culture or origin, regardless of race.

CAUCASIAN: (Not of Hispanic origin); any person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

AMERICAN INDIAN/NATIVE AMERICAN: Any person having origins in any of the original peoples of North America (not including Alaska), and who maintains cultural identification through tribal affiliation or community recognition.

**POSITIONS HELD**

LIST TEACHING, ADMINISTRATIVE, AND/OR SPECIAL SERVICES POSITIONS PREVIOUSLY HELD. ATTACH AN ADDITIONAL SHEET IF NECESSARY.

SCHOOL YEAR(S)	DAYS PER YEAR	SCHOOL NAME	CITY, STATE	POSITION TITLE	SUBJECT/GRADE LEVEL(S)

**RECORD OF TRAINING**

OFFICIAL TRANSCRIPTS FROM ALL INSTITUTIONS LISTED BELOW MUST BE INCLUDED WITH THIS APPLICATION. LIST ALL COLLEGES/UNIVERSITIES ATTENDED TO COMPLETE YOUR DEGREE(S) AND APPROVED TEACHER PREPARATION PROGRAM(S). INCLUDE ALL COLLEGE COURSEWORK, INCLUDING COMMUNITY COLLEGE AND/OR TRANSFER CREDIT. OFFICIAL TRANSCRIPTS MAY BE OPENED, BUT NOT MARKED ON IN ANY WAY.

COLLEGE OR UNIVERSITY	CITY, STATE	DEGREE(S) EARNED	MAJOR/PROGRAM	YEARS ATTENDED

**TYPE OF CERTIFICATE**

PLEASE INDICATE THE TYPE OF CERTIFICATE YOU CURRENTLY HOLD.

- ☐ TYPE B PROVISIONAL (2-YEAR)    ☐ TYPE B TEMPORARY (1-YEAR)    ☐ TYPE B REEMPLOYMENT (1-YEAR)  
☐ TYPE C PROVISIONAL (2-YEAR)    ☐ TYPE C TEMPORARY (1-YEAR)    ☐ TYPE C REEMPLOYMENT (1-YEAR)

Department of Education & Early Development, Teacher Education and Certification

801 West 10th Street, Suite 200, PO Box 110500 Juneau, AK 99811-0500

Phone: (907) 465-2831 Fax: (907) 465-2441

tcwebmail@alaska.gov



## REGULAR CERTIFICATION APPLICATION

### REQUESTED ENDORSEMENTS

LIST ALL REQUESTED ENDORSEMENTS, CONTENT OR SPECIALTY AREA(S), AND GRADE LEVELS. A CERTIFICATION ANALYST WILL CONSIDER YOUR REQUEST WHEN ANALYZING YOUR OFFICIAL TRANSCRIPTS AND OTHER DOCUMENTS.

<u>CONTENT AREA</u>	<u>GRADE LEVEL(S)</u>	<u>CONTENT AREA</u>	<u>GRADE LEVEL(S)</u>
(SAMPLE) ELEMENTARY EDUCATION	K-8	3. _____	_____
1. _____	_____	4. _____	_____
2. _____	_____	5. _____	_____

### REQUIREMENTS

ALL REQUIREMENTS LISTED BELOW MUST BE **COMPLETED** IN ORDER TO QUALIFY FOR THE **REGULAR** CERTIFICATE

- ☐ ALASKA STUDIES COURSEWORK  
Official transcripts reflecting 3 semester hours of APPROVED Alaska Studies coursework must be included with the application.  
To view a list of all approved courses, visit [www.eed.state.ak.us/TeacherCertification/Approvedcourses.html](http://www.eed.state.ak.us/TeacherCertification/Approvedcourses.html)
- ☐ MULTICULTURAL/CROSS-CULTURAL COMMUNICATIONS COURSEWORK  
Official transcripts reflecting 3 semester hours of APPROVED Multicultural/Cross-cultural Communications coursework must be included with the application.  
To view a list of all approved courses, visit [www.eed.state.ak.us/TeacherCertification/Approvedcourses.html](http://www.eed.state.ak.us/TeacherCertification/Approvedcourses.html)

ADDITIONAL REQUIREMENTS FOR ALL **ADMINISTRATIVE** APPLICATIONS:

- ☐ MASTER'S DEGREE OR HIGHER, FROM A REGIONALLY ACCREDITED INSTITUTION.  
Official transcripts reflecting all coursework and degree(s) must be included with the application.
- ☐ EDUCATIONAL ADMINISTRATION PROGRAM OFFERED BY A REGIONALLY ACCREDITED INSTITUTION.  
The preparing institution must sign and endorse the Institutional Recommendation, indicating standards.  
The original Institutional Recommendation must be included with the application.
- ☐ SIX SEMESTER HOURS OF CREDIT WITHIN THE FIVE YEARS IMMEDIATELY PRECEDING THE APPLICATION.  
Official transcripts reflecting at least 6 semester hours (or 9 quarter hours) of credit earned within the previous five years must be included with the application. Required for all EXCEPT holders of a Type B Provisional.

ADDITIONAL REQUIREMENTS FOR ALL **SPECIAL SERVICES** APPLICATIONS:

- ☐ BACHELOR'S DEGREE OR HIGHER, FROM A REGIONALLY ACCREDITED INSTITUTION.  
Official transcripts reflecting all coursework and degree(s) must be included with the application.
- ☐ **-OR-** MASTER'S DEGREE OR HIGHER, FROM A REGIONALLY ACCREDITED INSTITUTION.  
A master's degree or higher in the endorsement area is required for School Psychologists and Speech/Language/Hearing areas  
Official transcripts reflecting all coursework and degree(s) must be included with the application.
- ☐ SIX SEMESTER HOURS OF CREDIT WITHIN THE FIVE YEARS IMMEDIATELY PRECEDING THE APPLICATION.  
Official transcripts reflecting at least 6 semester hours (or 9 quarter hours) of credit earned within the previous five years must be included with the application. Required for all EXCEPT holders of a Type C Provisional.

Department of Education & Early Development, Teacher Education and Certification

801 West 10th Street, Suite 200, PO Box 110500 Juneau, AK 99811-0500

Phone: (907) 465-2831 Fax: (907) 465-2441

tcwebmail@alaska.gov



## REGULAR CERTIFICATION APPLICATION

### FEE SCHEDULE

THE FEE FOR REGULAR CERTIFICATION \$125.00 PER CERTIFICATE. THE FINGERPRINT PROCESSING FEE IS \$60.00. YOU MAY PAY WITH A CASHIER'S CHECK (PAYABLE TO EED), MONEY ORDER, OR CREDIT CARD (VISA OR MASTERCARD). FEES ARE NON-REFUNDABLE. **NO PERSONAL CHECKS WILL BE ACCEPTED.**

PLEASE INDICATE:

			.	0	0
--	--	--	---	---	---

AMOUNT

				-					-					-				
--	--	--	--	---	--	--	--	--	---	--	--	--	--	---	--	--	--	--

CREDIT CARD NUMBER

		/		
--	--	---	--	--

EXPIRATION DATE (MM/YY)

NAME ON CREDIT CARD

CARDHOLDER'S SIGNATURE

### NOTARIZATION

STATE OF \_\_\_\_\_ DATE \_\_\_\_\_  
(MONTH/DAY/YEAR)

\_\_\_\_\_  
(NAME OF APPLICANT) APPEARED BEFORE ME WHOSE

IDENTIFICATION I HAVE VERIFIED ON THE BASIS OF \_\_\_\_\_  
(TYPE OF PHOTO ID)

TO BE THE SIGNER OF THIS APPLICATION AND HE/SHE  
ACKNOWLEDGED THAT HE/SHE SIGNED IT.

\_\_\_\_\_  
(SIGNATURE OF NOTARY)

MY COMMISSION EXPIRES: \_\_\_\_\_

**IF A NOTARY IS NOT AVAILABLE, A POSTMASTER MAY  
WITNESS, DATE STAMP AND SIGN THIS AFFIDAVIT.**

I CERTIFY UNDER PENALTY OF PERJURY THAT THE  
STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE  
AND CORRECT TO THE BEST OF MY KNOWLEDGE. FURTHER, I  
ACKNOWLEDGE THAT I HAVE READ AND WILL ADHERE TO  
THE **STATE OF ALASKA CODE OF ETHICS OF THE  
EDUCATION PROFESSION**. THIS BECOMES PART OF MY  
OFFICIAL RECORD.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

-CONTINUED ON NEXT PAGE-

Department of Education & Early Development, Teacher Education and Certification

801 West 10th Street, Suite 200, PO Box 110500 Juneau, AK 99811-0500

Phone: (907) 465-2831 Fax: (907) 465-2441

tcwebmail@alaska.gov

(Regular Certification)

4/21/09



## REGULAR CERTIFICATION APPLICATION

### CHECKLIST

YOU MUST INCLUDE ALL OF THE FOLLOWING ITEMS IN A SINGLE APPLICATION PACKET. IF ANY ITEM IS MISSING, THE ENTIRE APPLICATION PACKET WILL BE RETURNED, UNPROCESSED. PLEASE CONFIRM WITH EACH CHECKBOX, THAT EACH ITEM IS INCLUDED.

- ☐ **COMPLETE REGULAR CERTIFICATION APPLICATION**  
Make sure all sections of the application are complete. If any section is incomplete, all documents will be returned.  
The application must be mailed to the Teacher Certification office at the address below. Photocopies/faxes will not be accepted.

- ☐ **SIGNATURE AND NOTARIZATION**  
The 'NOTARIZATION' section of the application must be completed by all applicants.  
A Notary Public or a Postmaster must witness and verify your signature with a signature and stamp/seal.

- ☐ **APPLICATION FEES**  
The application fee for a Regular certificate is \$125. The fingerprint processing fee is \$60. Fees are non-refundable.  
Submit a total fee of \$185. Please refer to the 'FEE SCHEDULE' section of the application.  
NO PERSONAL CHECKS WILL BE ACCEPTED.

- ☐ **FINGERPRINT CARD**  
1 FBI Applicant fingerprint card (Form FD-258)  
If you cannot obtain the fingerprint card locally, call or email Teacher Certification to request a card be sent to you.  
If any section of the fingerprint card is incomplete, the entire application packet will be returned.

**-OR-**

**EMPLOYMENT VERIFICATION**  
Verification of current employment in a certified position in a public school district in Alaska.  
*You may submit a letter from the employing school district office, or a photocopy of your current contract as verification.*

**FOR APPLICATIONS DURING THE SCHOOL YEAR**  
Submit employment verification for the current school year.

**FOR APPLICATIONS DURING THE SUMMER MONTHS**  
Applications submitted prior to July 1<sup>st</sup> must include employment verification from the previous school year.  
Applications submitted after July 1<sup>st</sup> must include employment verification for the following school year.

- ☐ **OFFICIAL TRANSCRIPTS**  
Official transcripts of all academic work listed in the 'RECORD OF TRAINING' section must be included with the application.  
Unofficial, photocopied, or faxed transcripts will not be accepted.  
*OFFICIAL TRANSCRIPTS MAY BE OPENED, BUT NOT MARKED ON IN ANY WAY.*

- ☐ **ORIGINAL INSTITUTIONAL RECOMMENDATION**  
An original Institutional Recommendation must be included with this application. Photocopies/faxes will not be accepted.  
Required ONLY for the Type B Reemployment certificate.




---

## ADMINISTRATIVE ENDORSEMENTS

PRINCIPAL  
SUPERINTENDENT  
CURRICULUM  
ADMINISTRATION  
DIRECTOR OF VOCATIONAL EDUCATION  
DIRECTOR OF SPECIAL EDUCATION

---

## SPECIAL SERVICES ENDORSEMENTS

SCHOOL COUNSELOR  
GUIDANCE AND COUNSELING

SCHOOL LIBRARIAN  
LIBRARY SCIENCE  
MEDIA SPECIALIST

SCHOOL NURSE  
NURSING

SCHOOL PSYCHOLOGIST  
SCHOOL PSYCHOMETRIST  
EDUCATIONAL DIAGNOSTICIAN

SCHOOL SOCIAL WORK

SPEECH/LANGUAGE PATHOLOGY  
SPEECH PATHOLOGY  
AUDIOLOGY  
SPEECH AND HEARING  
SPEECH THERAPY

OCCUPATIONAL THERAPY  
PHYSICAL THERAPY  
ORIENTATION AND MOBILITY

---

## GRADE LEVELS

BIRTH – GRADE 3	GRADES K-3	GRADES 5-8	GRADES 7-10	GRADES 9-12
PRE K – GRADE 3	GRADES K-5	GRADES 5-12	GRADES 7-12	
PRE K – GRADE 12	GRADES K-8			
	GRADES K-12			